

Application Data Sheet

Application Information

Application number:
Filing Date: 11/14/03
Application Type: Regular
Subject Matter: Utility
Suggested classification:
Suggested Group Art Unit:
CD-ROM or CD-R?: None
Number of CD disks:
Number of copies of CDs:
Sequence submission?:
Computer Readable Form (CRF)?:
Number of copies of CRF:
Title: POLYMER COMPOSITIONS
Attorney Docket Number: 003259.87559
Request for Early Publication?: NO
Request for Non-Publication?: NO
Suggested Drawing Figure:
Total Drawing Sheets: 1
Small Entity?: NO
Latin name:
Variety denomination name:
Petition included?: NO
Petition Type:
Licensed US Govt. Agency:
Contract or Grant Numbers:
Secrecy Order in Parent Appl.?: NO

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: UK
Status: Full Capacity
Given Name: William
Middle Name: J.
Family Name: Benton
Name Suffix:
City of Residence: Magnolia
State or Province of Residence: TX
Country of Residence: USA
Street of mailing address: 16723 Cimmaron
City of mailing address: Magnolia
State or Province of mailing address: TX
Country of mailing address: USA
Postal or Zip Code of mailing address: 77355

Applicant Authority Type: Inventor
Primary Citizenship Country: USA
Status: Full Capacity
Given Name: Edward
Middle Name: E.
Family Name: Miller
Name Suffix:
City of Residence: Plano
State or Province of Residence: TX
Country of Residence: USA
Street of mailing address: 6417 Rainier Road
City of mailing address: Plano

State or Province of mailing address: TX
Country of mailing address: USA
Postal or Zip Code of mailing address: 75023

Correspondence Information

Correspondence Customer Number: 28318

Representative Information

Representative Customer Number: 28318

Domestic Priority Information

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This Application	Division of	09/574,986	05/19/00
which is a	Non-Provisional of	60/165,789	11/16/99
and is a	Continuation-in-Part of	09/316,527	05/21/99

Foreign Priority Information

Country:	Application number:	Filing Date:	Priority Claimed:

Assignee Information

Assignee name: Cabot Corporation
Street of mailing address: 2 Seaport Lane
City of mailing address: Boston
State or Province of mailing address: MA
Country of mailing address: US
Postal or Zip Code of mailing address: 02210